

Region 4 RAC Meeting 03 13 10 – Intermountain Hospital meeting room, Boise

Marilyn Baughman, Michelle Belville, Sharon Burke, Melanie Curtis, Karen des Aulniers, Michael Dickson, LaDessa Foster, Vern Garrett, Dennis Hardziej, Kim Helmandollar, Helen Huff, Sandy Jones, Cheryl Jordan, Jeff Morrell, Darren Richman, Kathy Skippen, Laura Thomas

Provider Subcommittee Meeting started at 9:00 a.m.

Provider Update - Central office staff and Office of Drug Policy staff

JFAC has set the FY 2011 budget and given current circumstances, substance abuse fared well. The \$866,500 hold back in the 2010 budget is continued in the FY 2011 budget. That budget needs to be approved by the legislature, so is not final yet. Given the cuts in other areas of state government, this 7% reduction, while difficult for providing services, shows support for substance abuse treatment and prevention efforts.

Now the efforts are to manage the budget hold backs in this fiscal year so that when FY 2011 starts, the entire budget is available. If spending is not reduced to the FY 2010 budget by the end of the fiscal year, the balance will come from the FY 2011 budget. Because the budget has to be managed on the "back side" (due to priority populations entering care on the "front side") the following steps are being taken:

Safe and sober housing vouchers are being limited to no more than 6 months (from up to 12 months prior to now)

Transportation services new and not processed yet will be denied as the benefit has ended in the current fiscal year budget.

Family, Marital and Life Skill recovery supports services are now ended in the current fiscal year budget.

BPA is reducing client list for outpatient treatment by 20% for adults and 15% for adolescents, considering length of stay and responsiveness to treatment.

Decisions are being made about case management services; we do not have information to report as of this meeting.

There are conversations with the courts regarding that part of the budget.

The budget committee of the Inter Agency Committee on Substance Abuse (ICSA) is meeting on an as needed basis to address the budget during this fiscal year. The goal is to manage to this year's budget to minimize the impact in FY 2011. The work is not easy.

Discussion included concerns about disproportion accessing of funds (on per capita basis), particularly from court-ordered approaches, and the effect on the viability of the provider network statewide. Providers suggested the besides the funding of court-related services, two other areas to review are length of stay and level of care. Regional budgets were also discussed with the acknowledgment that currently we don't have the infrastructure in place and that the Transformational Work Group is looking at regional approaches for behavioral health, which includes SUDS.

Full RAC meeting commenced at 10:00 a.m. The agenda was adjust to allow for the Allumbaugh House presentation first on the agenda.

Cindy Miller, program manager of Allumbaugh House announced the facility is on schedule to open May 3, 2010. She covered the basic eligibility criteria for the three areas of care that will be provided : Detoxification, Mental Health Crisis Services and the Sobering Station. The eligibility criteria is defined by IDAPA.

The attachment to these minutes is the most recent draft; the information shaded is not yet final and still being reviewed. They anticipate that admissions to the Detoxification area (8 beds) will be scheduled admissions. The 8-bed mental health will use Level V Locus placement criteria and by nature will be more crisis oriented for admissions. Length of stay in both areas is expected to not exceed 7 days. Sage Health Care is providing medical services, including co-medical directors. The sobering station will operate from 7 p.m. to 11 a.m. on Thursdays, Fridays and Saturdays.

The minutes from the January 13, 2010 RAC meeting were approved with the corrections received.

Karen des Aulniers of Treasure Valley Alcohol and Drug Coalition announced Orange Ribbon – a promotion to raise awareness of under age drinking. The promotion will have different activities throughout the year. Mayor Bieter and other mayors in the Treasure Valley will proclaim April Orange Ribbon month; it is Alcohol Awareness Month. On May 1, there will be a town hall meeting on the statehouse steps. This is intended to be a statewide event not just a City of Boise event. June 26 there will be an event in Veterans Park. All the activities, carnival style games, educational resources and food (pancake feed in the morning is planned) will be provided free of charge. Goal is to target parents. As other activities are finalized for the fall, TVADC will publicize those activities.

Anyone interested in volunteering, contact Karen at tvadc@tvadc.org. Other coalitions in Idaho will be doing Orange Ribbon activities, also.

RADAR is relocating to a larger space nearly their current offices. They are moving from the south side to the north end of the building.

Regional Projects Update –

Laura reminded everyone that nominations for the Prevention Award given at the Prevention Conference are due to Terry Pappin by March 15. A nomination form was emailed last week; contact Laura if one is needed.

Feedback on the 2010 Legislative Event and Awards Ceremony shows both are valued, but the 4th floor location may not be worth the cost, time and effort since very little traffic by legislators was experienced.

A group in Elmore county is planning a RX drug take back event for May 8, 2010. There is also a national effort to have RX take-back events on November 13, 2010.

A problem with links to current lists of providers for treatment, recovery support services and DUI evaluators has been resolved.

Laura asked for guidance on the RAC budget, as it was reduced by \$1000. The decision was made to offer 8 ICADD scholarships and 4 pre conference scholarships for the Clinical Supervision course. Preference will be given to each county in the region, active RAC members, and those who have not received Region 4 scholarships in previous years. The application information will be posted to the RAC 4 web page by the end of the week. See revised budget in attachments.

Networking Updates

Elisha Figueroa, MADC – The RX drug take back program is very successful. They have collected over 400 pounds of unused/wanted Rx and over the counter drugs since October. They are working on an innovative approach to an underage drinking town hall event and will share details when confirmed. An event is planned for Meadow Lake Village in April. They are expanding their Recognize program to Meridian PAL football and baseball this spring. They are supporting the Parent Project classes through Drug Free Idaho and Smart Moves at the Boys and Girls Club in Meridian.

Sandy Jones, Ada County Sheriff's office, shared that they will be having an open house on April 7th for their new day reporting center.

Marilyn Baughman, Intermountain Hospital, reported the meeting room the RAC meeting was held in will be their new Lunch and Learn meeting space. Idaho Rural Health has adopted the Jason Foundation (teen suicide prevention). Family physicians from around Idaho are presenting information in a variety of smaller communities in Idaho. Intermountain Hospital adopted the Jason Foundation a few years ago to help further the message and mission.

Sharon Burke, Office of Drug Policy, shared that she is acting director during Debbie Fields leave of absence (until December 1, 2010). Matt McCarter from SDE is helping to guide the Prevention subcommittee. In addition to ICSA work, ODP is also working on a pharmacy project and will have a law enforcement summit in the fall.

Kathy Skippen, H&W, shared that the ATR grant has been submitted. If Idaho is awarded the funding, it would begin in the next federal fiscal year, October 1, 2010.

Dennis Hardziej, Community Services Counseling, has been working on the ICADD conference and encouraged attendance. He noted the preconference topics are clinical supervision (full day) and ethics (1/2 day).

Cheryl Jordan, Pathways Counseling is attending the meeting for the first time. They have recently been added to the state list of providers, however, have been providing outpatient treatment for alcohol and drug abuse and domestic violence for many years. They are a primary provider for IDOC and misdemeanor court. They are located at 5333 Franklin Avenue in Boise.

ODP is willing to host quarterly webinars for providers statewide if that would be useful. General consensus of group was any measures that help with communication are appreciated.

Next providers sub committee meeting will be 9 a.m. on Tuesday, April 20, 2010 – location to be announced.

Region 4 RAC Meeting
DRAFT AGENDA 3/10/10
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NEW Meeting Location – Intermountain Hospital Campus
Directions at end of Agenda – Different meeting room than previous meetings.
9:00 a.m. Provider Subcommittee; 10:00 a.m. to noon full RAC meeting

- * 9:00 a.m. Provider Meeting (Treatment, Recovery Support) -
Provider Updates from H&W Central office staff, Office of Drug Policy staff and
BPA staff (invited)
- * 10:00 a.m. (approximately) Approval of Agenda and Minutes of January 10, 2010 RAC
Meeting, Darren Richman, Region IV RAC Chair
- * 10:05 a.m. Updates on Substance Abuse issues and legislative session from Central Office
Staff and Office of Drug Policy staff (invited)
- * 10:30 a.m. RAC Chair Update, Darren Richman
- * 10:40 a.m. Regional Director Update, Ross Mason
- * 10:45 a.m. Updates on Regional Projects, Laura Thomas CRDS
- * 10:55 a.m. RADAR Update
- * 11:55 a.m. TVADC requested time
- * 11:00 a.m. RAC Member Program Update
Cindy Miller/ Tom Old Allumbaugh House
- * 11:15 a.m. to noon Networking Updates

ALLUMBAUGH HOUSE SUMMARY

DRAFT 2-26-10

DETOXIFICATION	MENTAL HEALTH	SOBERING STATION
<p>Hours of Operation: 24/7</p> <p>Eligible Participants:</p> <ul style="list-style-type: none"> • 18 years of age and older. • Reside within Region IV, with priority to those brought by a funding partner agent or a resident within a funding partner area. • Priority to low-income and/or indigent clients. • Diagnosed with a substance abuse/addictions disorder. • Likely to have withdrawal upon cessation of use. • Meets ASAM placement criteria not to exceed Level III.7. • BAL value no greater than 200 mg/100 cc's. • Medically stable per medical history and assessment. • TB screening prior to admission (no action for negative, chest x-ray for positive). • Capacity to benefit from short-term stabilization. • Voluntary admission and participation. 	<p>Hours of Operation: 24/7</p> <p>Eligible Participants:</p> <ul style="list-style-type: none"> • 18 years of age and older. • Active IDHW Adult Mental Health patient, with priority to Region IV patients; or • Reside within Region IV, with priority to those brought by a funding partner agent or a resident within a funding partner area. • Priority to low-income and/or indigent clients. • Diagnosed with a DSM-IV-TR mental health disorder. • Meets Level V Locus placement criteria. • TB screening prior to admission (no action for negative, chest x-ray for positive). • Capacity to benefit from short-term stabilization. • Voluntary admission and participation. 	<p>Hours of Operation: Thursday, Friday, Saturday 7:00 pm – 11:00 am</p> <p>Eligible Participants:</p> <ul style="list-style-type: none"> • 18 years of age and older. • Reside within Region IV, with priority to those brought by a funding partner agent or a resident within a funding partner area. • Priority to low-income and/or indigent clients. • Referred by law enforcement, hospital or medical care provider. • Medically stable per medical assessment. • TB screening prior to admission (no action for negative, chest x-ray for positive). • Capacity to benefit from short-term stabilization. • Voluntary admission and participation.

ALLUMBAUGH HOUSE SUMMARY

DRAFT 2-26-10

Exclusionary Requirements: <ul style="list-style-type: none"> Does not meet ASAM placement Level III.7. Unwilling to enter treatment voluntarily. BAL exceeds 200 mg/100 cc's at time of admission. Subject of involuntary commitment proceedings/detention. Actively harmful to self/others. Acute medical condition. Can be safely treated in less intensive level of care. 	Exclusionary Requirements: <ul style="list-style-type: none"> Self-referral. Does not meet Locus Level V. Unwilling to enter treatment voluntarily. Subject of involuntary commitment proceedings/detention. Actively harmful to self/others. Unwilling to contract for no self-harm. Acute medical condition. Can be safely treated in less intensive level of care. 	Exclusionary Requirements: <ul style="list-style-type: none"> Self-referral. Unwilling to enter treatment voluntarily. Subject of involuntary commitment proceedings/detention. Actively harmful to self/others. Unwilling to contract for no self-harm. Acute medical condition. Can be safely treated in less intensive level of care.
Admission Process: <ul style="list-style-type: none"> Referral agent or potential client calls AH for case staffing. If appears appropriate, scheduled for ASAM screening appointment with CADC. Mini screening completed if previously screened by community partners who utilized ASAM PPC-2R and recommended Level III.7 admission. If capacity and client meets admission criteria, client scheduled for admission. Patient or referring agent to provide transportation. Upon arrival, nursing assessment conducted and admission paperwork completed. Client personal belongings secured, client oriented to unit, and bed placement assigned. Monitored per orders. Community partner notified if client does 	Admission Process: <ul style="list-style-type: none"> Referral agent calls AH for case staffing. If appears appropriate placement and capacity, client scheduled for admission. Community partner provided with date/time of admission. Referring agent to provide transportation. Upon arrival, nursing assessment conducted and admission paperwork completed. Client personal belongings secured, client oriented to unit, and bed placement assigned. Monitored per orders. Community partner notified if client does not present at admission time. 	Admission Process: <ul style="list-style-type: none"> Referral agent calls AH for case staffing. If appears appropriate placement and capacity, client scheduled for admission. Referring agent to provide transportation. Upon arrival, nursing assessment conducted and admission paperwork completed. Clients provided scrubs, personal belongings secured and bed placement assigned. Monitored per orders.

ALLUMBAUGH HOUSE SUMMARY

DRAFT 2-26-10

not present for admission or screening.		
Services Offered: <ul style="list-style-type: none"> • Assessment • Psychiatric and medical evaluation • Treatment planning • Medication Management and Monitoring • Counseling/Education • Case management • Discharge planning • Recreation/Living Skills 	Services Offered: <ul style="list-style-type: none"> • Assessment • Treatment planning • Medication Management and Monitoring • Counseling/Education • Case management • Discharge planning • Recreation/Living Skills 	Services Offered: <ul style="list-style-type: none"> • Assessment • Monitoring • Discharge planning

RAC Budget Update 3 10 2010

Budget recap expenditures to date:

\$ 61.20 RAC Mtg expenses in Sept and Nov
\$ 118.66 Legislative Event (25 + 93.66)
\$ 96.50 Underage Drinking education event in Cascade – staff travel expenses
0.00 Scholarships Valley County Underage Drinking education training – none
\$ 1400.00 Prevention Scholarships at 2 per county per region (1 declined)
\$ 1676.36

Budgeted Expenses

\$ 1920.00 ICADD scholarships, 2 per county per region (\$240 each)
\$ 360.00 ICADD Pre-conference Scholarships 1 per county in region (\$90 each)
\$ 2280.00 Subtotal budgeted

$\$1676.36 + \$2280.00 = \$3956.36$

This budget would leave \$43.64 for additional expenses/projects